## BIOLIFE

## RESEARCH ARTICLE

# HUMAN IMMUNODEFICIENCY VIRUS (HIV-1) REVERSE RANSCRIPTASE INHIBITORYACTIVITY OF *ECLIPTA ALBA* (L) LEAVES CRUDE EXTRACTS

Venkanna Lunavath<sup>1</sup> and Estari Mamidala<sup>2</sup>\*

<sup>1-2</sup> Infectious Diseases & Metabolic Disorders Research Lab, Department of Zoology, Kakatiya University, Warangal-506009, (A.P), India.

E-mail: estari08@gmail.com

#### **ABSTRACT**

Highly active anti-retroviral therapy (HAART) is the current HIV/AIDS treatment modality. Despite the fact that HAART is very effective in suppressing HIV-1 replication and reducing the mortality of HIV/AIDS patients, it has become increasingly clear that HAART does not offer an ultimate cure to HIV/AIDS. The high cost of the HAART regimen has impeded its delivery to over 90% of the HIV/AIDS population in the world. This reality has urgently called for the need to develop inexpensive alternative anti-HIV/AIDS therapy. This need has further manifested by recent clinical trial failures in anti-HIV-1 vaccines and microbicides. In the current study, we characterized a panel of extracts of traditional medicinal plants for their activities against HIV-1 replication. The aim of the present study was to evaluate the in vitro anti- HIV activity of Eclipta alba plant extracts. Extracts were prepared from dried leaves in Hexane, Chloroform, Ethyl acetate, Acetone and Methanol. Peripheral Blood Mononuclear Cells (PBMCs) isolated from healthy donors by ficoll-hypaque density gradient centrifugation method. A toxicity study was performed on all crude extracts by MTT assay using PBMCs isolated from whole blood. HIV-1 RT inhibition activity of the all solvent extracts of Eclipta alba was determined by a RetrsoSys HIV-1 RT activity kit (Innovagen, Sweden). The aerial parts of Eclipta alba extracts are shows anti-HIV-1 activity and this plant has great potential for developing useful drugs.

**Key words:** HIV, *Eclipta alba*, PBMCs, HIV-1 RT, Cytotoxicity...

#### INTRODUCTION

Since the discovery of the human immunodeficiency virus as the causative agent of AIDS New chemical entities with such activity may be identified through a variety of approaches, one of them being the screening of natural products. Plant substances are especially explored due to their amazing structural diversity and their broad range of biological activities. Several plant extracts have been shown to possess activity against HIV by inhibiting

various viral enzymes (Vermani and Garg, 2002). Medicinal plants as potential sources of new active agents not only combine the advantage of being relatively non-toxic and hence more tolerable than rationally designed drugs, but also represent an affordable and valuable source of pharmacologically active substances that can be made sufficiently available through cultivation (King Rewers,1993) Nature has been a source of medicinal treatments for thousands of years, and plant-based systems continue to play an essential role in the primary health care (Budka*et al.*, 1995; Van Everbroeck*et al.*, 2000; Brown *et al.*, 2004). It is estimated that 25 to 50% of all current pharmaceuticals are derived from plants (Cowan, 1999). In fact, it is now believed that plant based systems contribute 90% of the newly discovered pharmaceuticals. The aim of the present study was to evaluate the *invitro* anti-HIV activity of *Eclipta alba* plant extracts.

### MATERIALS AND METHODS

## **Preparation of Plant Extract:**

The aerial parts of the *Eclipta alba* were collected and left at room temperature for two weeks to dry, then ground into powder and extraction with soxhlet techniques with methanol. Obtaining methanolic crude extracts of *Eclipta alba* were evaporated to dryness by using rotary evaporator at low temperature (39°C).

#### **Isolation of PBMCs:**

Peripheral Blood Mononuclear Cells (PBMCs) were collected from the blood of healthy volunteers, by ficol-Hypaque density gradient centrifugation method. The samples were diluted at 1:1 ratio with PBS, layered onto HISEP media (Himedia, Mumbai) at a volume ratio of 3:1 and centrifuged at 1,000 x g for 30 min. During the centrifugation the PBMCs moved from the plasma and were suspended in the density gradient, The PBMCs layer was removed and then washed twice with PBS. The supernatant then removed and the cells resuspended in **RPMI** 1640 medium supplemented with 1 mM L-glutamine, 100 units/ml penicillin and 100 ug/ml streptomycin,10% inactivated FBS, and adjusted to pH 7.2 by the addition of 15 mM HEPES. The PBMC cell density used in thecytotoxicity study was 1 x 105 cells/ well of the 96-well tissue culture plate.

## **Cell Viability Assay:**

Cell viability was determined by the MTT 3-(4, 5dimethylthiazol-2-yl)-2, 5 diphenyltetrazolium bromide) test method. Briefly, MTT (5 mg/ml) was dissolved in PBS. PBMC Cells were cultured in 96-well plates (1.0 x 104 cells/well)

containing 100 µl medium prior to treatment with four extracts of selected plants at 37°C for 24 h. After that,100µl fresh medium containing various concentrations (0.02, 0.04, 0.09, 0.18, 0.37, 0.75 and 1.5 mg/ml) of extracts were added to each well, and incubated for another 48 h. Diluted extracts solutions were freshly prepared in DMSO, The metabolic activity of each well was determined by the 3-(4,5 dimethylthiazol-2-yl)-2,5 diphenyltetrazolium bromide (MTT) assay and compared to those of untreated cells.

## **HIV-RT** activity:

The HIV reverse transcriptase enzyme inhibition of extracts was determined using HIV RT inhibition assay by using of RetrsoSys HIV-1 RT activity kit (Innovagen, Sweden). Briefly, the diluted extracts are then added to a plate with 30 minutes reaction mixture. After preincubation at 33°C, the reaction is started by the addition of a standardised amount of RT. The RT will now incorporate BrdUMP depending on the level of inhibition. The reaction is stopped by washing the plate. The product is quantified by the addition of the RT Product Tracer which binds to the incorporated BrdUMP. After removing excess tracer the amount of bound tracer is determined by an alkaline phosphatase / pNPP colour reaction.

Plotted the percentage of residual RT activity against the concentrations of the substance dilutions for each of the tested substances. AZT (Azidothymidine/Zidovudine) was used as positive control. The inhibitory effect of each substance is expressed as an IC50 value and is determined withthe aid of the obtained graph. The percentage inhibition of HIV-1 RT was calculates as

Inhibition (%) = [(A control-A sample) / A control] x 100.

For statistical analysis, the results of anti-HIV-1 RT activity were expressed as means  $\pm$  SD of three determinations. The IC50 values were calculated using the Microsoft Excel program. Results were considered significant if the p-values were less than 0.05.

#### RESULTS AND DISCUSSION

## Percentage yield:

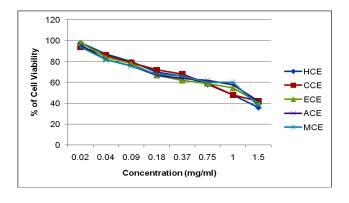
The yield of Hexane, Chloroform, Ethyl acetate, Acetone and Methanol crude extracts of *Eclipta aba* are 0.58, 0.4, 0.4, 0.3 and 0.9% respectively. The percentage yield of these solvent extract of *Eclipta alba* were showed in table-1. The methanol crude extract obtained highest yield (0.9%) when compared to other crude extracts. 0.4% yield obtained in chloroform and ethyl acetate which are lowest.

Table -1. Percentage of Yield

S. No	Extract	Powder weight (gms)	Yield (%)
1	Hexane	500 gr	0.58
2	Chloroform	500 gr	0.4
3	Ethyl acetate	500 gr	0.4
4	Acetone	500 gr	0.3
5	Methanol	500 gr	0.9

After cells were treated with different extracts of *Eclipta alba* at various concentrations for 48 h, the cytotoxic effects were investigated using the MTT assay. Cytotoxicity of each extract was determined by an inhibitory concentration at 50% growth (IC50). The IC50 values of HCE, CCE, ECE, ACE and MCE extracts of *E. alba* on PBMCs were  $1.0 \pm 0.02$ , >100,  $1.2 \pm 0.05$  and >100 mg/ml respectively. All the extracts of *Eclipta alba* were non cytotoxic (above 50% cell viability) at 1 mg/ml concentration in PBMC cells, and all the extracts are cytotoxic (below 50% cell viability) at the concentration of 1.5 mg/ml.

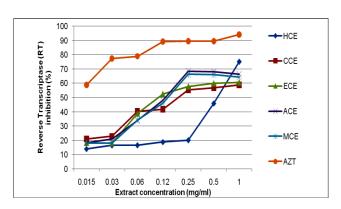
Fig 1: Effect of *E. alba* extracts on PBMC cells



(HCE=Hexane Crude Extract, CCE=Chloroform Crude Extract, ECE=Ethyl acetate Crude Extract and MCE= Methanol Crude).

Inhibition of HIV-RT by *E. alba* plant different extracts at different concentrations were presented in Fig-1. *E. alba* HCE (Hexane Crude Extracts) at 1 mg/ml concentration shows highest (75%) HIV-RT inhibition compare to other extracts at different concentrations. At the concentration of 0.015 mg/ml all extracts shows lower HIV-RT inhibition. At all concentration the control drug AZT shows more than 50% HIV-RT inhibition. After analysing the results from this study we stated that, *E. alba* shows more than 50% HIV-RT inhibition at the concentrations from 0.25 to 1 mg/ml in all extracts.

Fig-2. Inhibition of HIV-RT by E. alba plant different extracts at different concentrations



(HCE=-Hexane Crude Extract, CCE=Chloroform Crude Extract, ECE=Ethyl acetate Crude Extracts, ACE= Acetone Crude Extract and MCE= Methanol Crude Extract)

## **ACKNOWLEDGEMENTS**

The authors are thankful to the Prof. A V Raju, Department of Botany, Kakatiya University to authentification for Plant.

## **REFERENCES**

 Brown, P., Gibbs Jr., C.J., Rodgers-Johnson, P., Asher, D.M., Sulima, M.P., Bacote, A. &Gajdusek, D.C. 2004. Human spongiform

- encephalopathy: The National Institute of Health series of 300 cases of experimentally transmitted disease. *Annals of Neurology*35. 513-529.
- 2. Budka, H., Aguzzi, A., Brown, P., Brucher, J.M,Bugiani, O., Collinge, J., Diringer, H.,Gullotta, F., Haltia, M. &Hauw, J.J. 1995. Neuropathological diagnostic criteria for Creutzfeldt-Jakob disease (CJD) and other human spongiform encephalopathies (priondiseases). *Brain Pathology* 5, 319-322.
- 3. Cowan, M.M. 1999. Plant products a antimicrobial agents. *Clinical Microbiology Reviews* 12, 564-582.
- 4. King, H., &Rewers, M. 1993. Global estimates for prevalence of diabetes mellitus and impaired glucose tolerance in adults. WHOAd Hoc Diabetes Reporting Group. *Diabetes Care* 16, 157-177.
- Van Everbroeck, B., Pals, P., Dziedzie, T., Dom, R.,Godfraind, C., Sciot, R., Brucher, J.M.,Martin, J.J. &Cras, P. 2000. Retrospective study of Creutzfeldt-Jakob disease inBelgium: europhysiological findings. *ActaNeoropathologica*(Berl) 99, 358-364.
- 6. Vermani K, Garg S 2002. Herbal medicines for sexually transmitted diseases and AIDS. J. Ethnopharmacol., 80: 49–66.

\*\*\*\*